



Application Data Sheet

Application Information

Application Type:: Regular –
National Stage of PCT/US03/05874

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Computer Readable Form (CRF)?:: No

Title:: Intranasal Administration of MC4-R Agonists

Attorney Docket Number:: 072121-0397

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 3

Small Entity?:: No

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Linda Li

Family Name:: XIAO

City of Residence:: Alameda

State or Province of CA

Residence::

Country of Residence:: US
Street of mailing address::
City of mailing address:: Alameda
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94501

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Baoji
Family Name:: XU
City of Residence:: Lafayette
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address::
City of mailing address:: Lafayette
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94549

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jian
Family Name:: LUO
City of Residence:: Brisbane
State or Province of Residence:: CA

Country of Residence:: US
Street of mailing address::
City of mailing address:: Brisbane
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94005

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Kirk
Family Name:: JOHNSON
City of Residence:: Moraga
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address::
City of mailing address:: Moraga
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94556

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: William H.
Family Name:: FREY
Name Suffix:: II

City of Residence:: White Bear Lake
State or Province of MN
Residence::
Country of Residence:: US
Street of mailing address::
City of mailing address:: White Bear Lake
State or Province of mailing MN
address::
Postal or Zip Code of mailing 55127
address::

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Effie
Family Name:: TOZZO
City of Residence:: Newton
State or Province of MA
Residence::
Country of Residence:: US
Street of mailing address::
City of mailing address:: Newton
State or Province of mailing MA
address::
Postal or Zip Code of mailing 02465
address::

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: David
Family Name:: DUHL

City of Residence:: Oakland
State or Province of CA
Residence::
Country of Residence:: US
Street of mailing address::
City of mailing address:: Oakland
State or Province of mailing CA
address::
Postal or Zip Code of mailing 94611
address::

Correspondence Information

Correspondence Customer Number:: 27476
Correspondence address: Steven Collier
Chiron Corporation
P.O. Box 8097
Emeryville, CA 94662
Telephone: (510) 923-3774
Facsimile: (510) 655-3542
E-Mail address:: steven.collier@chiron.com

Representative Information

Representative Customer	23524	
Number::		

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US03/05874	2/25/2003
PCT/US03/05874	An application claiming the benefit under 35 USC 119(e)	60/358,700	2/25/2002
PCT/US03/05874	An application claiming the benefit under 35 USC 119(e)	60/372/921	04/16/02

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name::

Chiron Corporation